

AMENDED CERTIFICATE OF SERVICE

I hereby certify that on the 19th day of April, 2021, a true and correct copy of the Agency's Request for Review filed on April 15, 2021 was served via email with the following individual:

William B.Cowen
Regional Director
Region 14
1222 Spruce Street, Rm. 8.302
St. Louis, MO 63103
William.cowen@nlrb.gov

/s/ Geoffrey M. Gilbert